|  |  |
| --- | --- |
| NAME: **Enter Name**PID: **Enter PID** | ERC Academic AdvisingPh: 858-534-9864<http://vac.ucsd.edu> |

**Academic Success Worksheet**

*Please fill out, print, and bring with you to your advising appointment*

PERSONAL INFORMATION

* Are you experiencing concerns related to Basic Needs?
*(ex: food, housing, and/or financial insecurities)* [ ]  **YES** [ ]  **NO**
	+ If you marked “Yes” above, please explain: **Enter Text**
* Please list those in your support system *(ex. friends/family/loved ones):* **Enter Text**
* Do you have a CAPS (Counseling & Psychological Services) release? [ ]  **YES** [ ]  **NO**
* Do you receive Financial Aid (grants, Veterans, loans)? [ ]  **YES** [ ]  **NO**

TIME MANGEMENT

* Where do you study the majority of time? **Enter Text**
* Approximately, how many hours per week did you spend on each of the following last quarter:
	+ Attending Class : **Enter Number**
	+ Studying during weekdays : **Enter Number**
	+ Studying during weekends : **Enter Number**
	+ Working, interning, or volunteering : **Enter Number**
	+ Social or co-curricular activities : **Enter Number**
	+ Gaming, Netflix, or social media : **Enter Number**
	+ Other Commitments (explain) : **Enter Number**
* How often do you go home? **Enter Text**

RESOURCES

* How often did you consult with your professors or TAs during office hours? **Enter Text**
* Did you utilize any tutoring services? [ ]  **YES** [ ]  **NO**
	+ If so, list resource(s): **Enter Text**
* Did you participate in any study groups? [ ]  **YES** [ ]  **NO**

SELF-REFLECTION

* Which course(s)/material do/did you…
	+ Enjoy the most: **Enter Text**
	+ Enjoy the least: **Enter Text**
* In which courses were you…
	+ Most successful: **Enter Text**
	+ Least successful: **Enter Text**
* What behaviors and/or situations do you think contributed to your academic difficulty?

**Enter Text**